



Department of Medical Assistance Services
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Richmond, Virginia 23219

<http://www.cns.state.va.us/dmas/>

MEDICAID PROVIDER MANUAL UPDATE

TO: All Rehabilitative Services providers participating in the Virginia Medical Assistance Program, Health Maintenance Organizations providing services to Virginia Medicaid recipients, and all holders of the *Rehabilitation* Medicaid provider manual

FROM: Patrick W. Finnerty, Director
Department of Medical Assistance Services

SUBJECT: Update to Second Edition of the *Rehabilitation* provider manual

UPDATE: R-01-02

DATE: 4/1/2002

The purpose of this memorandum is to provide revised April 2002 quarterly updates for your provider manual. The attached table shows the changes to the manual. Please insert the new pages and retain the attached table.

Chapter II contains revised provider agreements and a Mailing Suspension Request form with the form number deleted.

Chapter IV has been updated with the exception of the "Exhibits Section." The following is a brief description of certain changes made thereto: (i) updating the freedom of choice information; (ii) for intensive rehabilitation services, adding Interqual criteria upon admission as a requirement for admission, merging the "Individual Contracts" section to "Special Circumstances" and revising the requirements, changing the unit name and telephone number for the contact for preauthorization, adding requirements for the preauthorization of services and requiring the submission of the explanation of benefits (EOB) for the denial of a requested stay; (iii) for the physician component, a physician recertification statement, renewal of the physician orders, admission certification and a plan of care/treatment plan written every 60 days; (iv) for the physical therapy component, updating the license requirements for physical therapists and clarifying that therapy services rendered by students are not reimbursable under Medicaid; (v) for the occupational therapy and speech-language pathology components, (a) clarifying that therapy services rendered by students are not reimbursable under Medicaid, and (b) revising the qualifications for the provision of speech-language services; (vi) for coordination of rehabilitation services, changing references of "child" to "recipient." With regard to changes in provider reimbursement, Medicaid will not pay for group sessions that exceed six recipients.

In Chapter V, the update changes the billing instructions for the UB-92 billing invoice for Locator 8, N-CD. (Non-Covered Days), to Not Required, update the First Health address for sending remittance vouchers, update the name, address, and telephone number for obtaining Medicaid forms and brochures, and revise the “Exhibits” section Table of Contents to include the name of the revised forms and brochures ordering form and include a sample of the revised form.

In Chapter VI, the update includes the deletion of Section 150 of the *Virginia Administrative Code* as a compliance requirement for rehabilitation providers, the revision of the documentation requirements for physicians, rehabilitative therapies (PT, OT, SLP, Cognitive, Therapeutic Recreation), psychologists, and social workers, the revision of the reimbursement criteria for intensive CORF documentation. Further, the unit name to which the request for reconsideration and all supporting documentation must be submitted for a provider appeal has been updated, and three new forms required for physician use have been added. The new forms, effective for dates of service on or after May 1, 2002, are as follows: DMAS Intensive Rehabilitation Physician Plan of Care Review (DMAS-126), DMAS Intensive Rehabilitation Admission Certification (DMAS-127), and DMAS Intensive Rehabilitation 60-Day Recertification (DMAS-128).

The amendment to Appendix B updates the Administrator/Owner Compensation Limits table for the year 2002.

Please review these changes carefully.

COPIES OF MANUALS

DMAS publishes searchable and printable copies of its provider manuals and Medicaid memoranda on the Internet. Please visit the DMAS website at <http://www.cns.state.va.us/dmas/>. Refer to the Provider Column to find Medicaid and SLH provider manuals or click on “Medicaid Memos to Providers” to see Medicaid memoranda. The Internet is the fastest way to receive provider information.

“HELPLINE”

The “HELPLINE” is available Monday through Friday from 8:30 a.m. to 4:30 p.m., except State holidays, to answer questions. The “HELPLINE” numbers are:

786-6273	Richmond area
1-800-552-8627	All other areas

Please remember that the “HELPLINE” is for provider use only.

Attachment (1)

REHABILITATION MANUAL
REVISION CHART
April 1, 2002

SUMMARY OF REVISIONS

MANUAL SECTION	MATERIAL REVISED	NEW PAGE NUMBER(S)	REVISED PAGE(S)	REVISION DATE
Chapter II	Page 9 and Pages 1-3 of Exhibits		Page 9 and Pages 1-3 of Exhibits	4/1/02
Chapter IV	Table of Contents and Pages 1-13.1, 20-21, and 28-31	Page 13.2	Table of Contents and Pages 1-13.1, 20-21, and 28-31	4/1/02
Chapter V	Pages 3, 9, and 28-29 and Pages 4-5 of Exhibits		Pages 3, 9, and 28-29 and Pages 4-5 of Exhibits	4/1/02
Chapter VI	Cover Page, Table of Contents, and Pages 1-17	Pages 18-20 and Exhibits – Pages 2-7	Cover Page, Table of Contents, and Pages 1-17	4/1/02
Appendix B	Entire Appendix		Entire Appendix	1/1/02

FILING INSTRUCTIONS

MANUAL SECTION	DISCARD	INSERT	OTHER INSTRUCTIONS
Chapter II	Old Page 9 and Pages 1-3 of Exhibits	New Page 9 and Pages 1-3 of Exhibits	
Chapter IV	Old Table of Contents and Pages 1-13.1, 20-21, and 28-31	New Table of Contents and Pages 1-13.2, 20-21, and 28-31	
Chapter V	Old Pages 3, 9, and 28-29 and Pages 4-5 of Exhibits	New Pages 3, 9, and 28-29 and Pages 4-5 of Exhibits	
Chapter VI	Old Cover Page, Table of Contents, and Pages 1-17	New Cover Page, Table of Contents, Pages 1-20, and Exhibits – Pages 2-7	
Appendix B	Old Entire Appendix	New Entire Appendix	